

Soroptimist International of the Americas

SOROPTIMIST INTERNATIONAL OF BOISE IN KIND CONTRIBUTION FORM

<u>Name:</u> _		Date:			
Officer of	or Committee:	1	Email:		
Address:			Phone:		
Date	Description of	Purpose = Conference/	Real or Approx	How was Value	
Date	Contributed Items o Service		Value	Determined? (actual, appraisal, fmv)	
• M • S	Make a copy for your record	all expenses (copies of phone bil ds of receipts and Expense form nd with receipts to SI Boise Treas	submitted		
Send original to: SI Boise Treasurer PO Box 8885 Boise, ID 83707-2885		Signed:			
		Date Submitted:		ck No :	
		Date Paid: By:	<u>Cne</u>	ck No.:, Club Treasurer	